

# A Chance to Dance

COMMUNITY DAY  
LOS ANGELES BALLET *Outreach*



## *Registration*

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

e-Mail \_\_\_\_\_

## *Release of Liability*

I, the undersigned, on behalf of myself and/or my dependent(s), (including without limitation people or children I am guardian for, or otherwise responsible for) represent and agree as follows:

(a) I understand the risk of injury and accident associated with dance and fitness classes, including the stresses on the body associated with repetitive movement and exercise. I assume these risks, and agree to hold harmless Los Angeles Ballet (LAB) and its officers, agents, and employees against any and all injuries, accidents, costs, losses, damages, and expenses (including attorney's fees) which I or my dependent(s) might suffer from use of Los Angeles Ballet Center (LAB Center), or from participation in LAB's Chance to Dance Community Day classes, events and activities, including, but not limited to, class participation, (before, during, or after-class participation), the use of exercise equipment, the use of all LAB Center facilities, including parking lot, stairs, dressing rooms, restrooms, etc., **of whatever kind or character and without limitation.** I waive any claims, liens, demands or causes of action which I now, or in the future, possess against LAB arising out of or in any way related to the use of LAB Center, or arising out of or in any way related to my participation in LAB's Chance to Dance Community Day classes, events and activities.

(b) I agree that I and/or my dependant(s) are in good medical standing and physical condition, and have no illness, disability, disease or other concern that may expose me/my dependent(s) to the risk of injury or impairment in any way while on LAB Center premises. I understand that I am personally accountable for my own health and well being, and the health and well being of my dependent(s) while participating in any Los Angeles Ballet Chance to Dance Community Day class, activity, or related event.

(c) I assume all responsibility for my possessions and the possessions of my dependent(s). I hold harmless Los Angeles Ballet for any personal property damage or theft that may occur while on LAB Center premises; before, during and after any LAB Chance to Dance Community Day class, event or activity.

(d) I/my dependent(s) understand classroom and studio etiquette, and will abide by the rules set forth by Los Angeles Ballet while on LAB Center premises. I also acknowledge and accept that Los Angeles Ballet, its faculty, employees, officers, or agents, reserve the right to refuse service to anyone.

Date: \_\_\_\_\_, 201\_\_

Name of Participant(s): \_\_\_\_\_

Name of Legal Guardian, (if any Participant is under 18): \_\_\_\_\_

Signature(s) of All Participant(s): \_\_\_\_\_

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